



02-24-04

HDP/SB/21 based on PTO/SB/21 (08-00)

Please type a plus sign (+) inside this box →

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/619,230
		Filing Date	07/14/2003
		First Named Inventor	Kazuoki Matsugatani, et al.
Total Number of Pages in This Submission		Group Art Unit	2838
		Examiner Name	Unknown
		Attorney Docket Number	4041J-000626/DVA

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input checked="" type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Corrected Application Data Sheet; Transmittal of Formal Drawings and Return Receipt Postcard.
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed.
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Harness, Dickey & Pierce, P.L.C.	Attorney Name Michael J. Schmidt	Reg. No. 34,007
Signature			
Date	February 23, 2004		

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service as express mail in an envelope addressed to: Director of the U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date indicated below.

Typed or printed name	Michael J. Schmidt	Express Mail Label No.	EV 406 074 577 US (02/23/2004)
Signature		Date	February 23, 2004

EV 406 074 577 US



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 10/619,230

Filing Date: 07/14/2003

Applicant: Kazuoki Matsugatani, et al.

Group Art Unit: 2838

Examiner: Unknown

Title: GAIN CONTROL DEVICE FOR PACKET SIGNAL RECEIVER

Attorney Docket: 4041J-000626/DVA

Director of The United States Patent and Trademark Office
P.O. Box 1450
Alexandria, Virginia 22313-1450

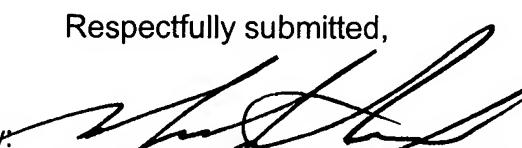
TRANSMITTAL OF FORMAL DRAWINGS

Sir:

Enclosed for filing are eight (8) "Replacement Sheets" including formal drawings (Figs. 1-13) for the above-identified patent application. Please note that we have also enclosed a corrected Application Data Sheet. The original indicated there were only two sheets of formal drawings; however, there are eight sheets of formal drawings. Applicant respectfully requests that the enclosed FORMAL DRAWINGS replace the most recent drawings filed with the application.

Respectfully submitted,

By:


Michael J. Schmidt, Reg. No. 34,007

Date: February 23, 2004

Harness, Dickey & Pierce, P.L.C.
P.O. Box 828
Bloomfield Hills, MI 48303
248-641-1600